

Minutes of the meeting of the Quality and Patient Safety Committee of the Board of Directors of the Cook County Health and Hospitals System held Friday, September 21, 2018 at the hour of 10:00 A.M. at 1900 W. Polk Street, in the Second Floor Conference Room, Chicago, Illinois.

I. Attendance/Call to Order

Chair Gugenheim called the meeting to order.

Present: Chair Ada Mary Gugenheim and Directors Mary Driscoll, RN, MPH and Layla P. Suleiman Gonzalez, PhD, JD (3)
Board Chair M. Hill Hammock (ex-officio) and Director Emilie N. Junge
Patrick T. Driscoll, Jr. (non-Director Member)

Absent: None (0)

Additional attendees and/or presenters were:

Claudia Fegan, MD – Chief Medical Officer
Amanda Grasso – Director of Business Intelligence
Valerie Hansbrough, MD – Provident Hospital of Cook County
Trevor Lewis, MD – John H. Stroger, Jr. Hospital of Cook County

Jeff McCutchan –General Counsel
Deborah Santana – Secretary to the Board
John Jay Shannon, MD – Chief Executive Officer
Sonya Watkins - System Director, Regulatory Affairs and Accreditation
Ronald Wyatt, MD – Chief Quality Officer

II. Public Speakers

Chair Gugenheim asked the Secretary to call upon the registered public speakers.

The Secretary responded that there were none present.

III. Report from Chief Quality Officer

A. Regulatory and Accreditation Updates (Attachment #1)

Dr. Ronald Wyatt, Chief Quality Officer, and Sonya Watkins, System Director of Regulatory Affairs and Accreditation, provided an overview of the regulatory update, which included information on the following subjects:

- Stroger Hospital and affiliated community health centers – The Joint Commission (TJC) Survey
- Organizational Strengths
- Summary of Standard Findings
- Condition of Participation
- Post Survey Process
- Overall Plan of Correction
- Organizational Response

Following the review of the information, Dr. John Jay Shannon, Chief Executive Officer, thanked Dr. Wyatt, Ms. Watkins and all staff for their efforts to prepare for the survey and continuing work to remain in a state of continued readiness. Board Chair Hammock recommended that the Board spend time reviewing and discussing this information at their meeting next week.

Proposed Amendments to the 9/21/18 QPS Committee Meeting Minutes – presented for consideration to the Committee on October 19, 2018

III. Report from Chief Quality Officer (continued)**B. Metrics (Attachment #2)**

Dr. Wyatt provided an overview of the metrics. The Committee reviewed and discussed the information. Additionally, he provided a sample of the draft dashboard of metrics that is currently being created and refined (included in Attachment #2).

During the discussion of the Stroger Hospital safety measure on falls with injury, Director Driscoll inquired whether root cause analyses are done when these occur. Dr. Wyatt responded that he was not certain, but will take a closer look at that.

During the review of the draft dashboard, Director Driscoll requested that when the Committee receives this type of safety information, they should also receive information on what the organization is doing to move towards zero events occurring. Information should include whether root cause analyses have been done and the outcomes of those analyses, and what the corrective action plan is.

During the review of the measure on Depression Screening Referral Management, it was noted that the graph will be revised to a more reader-friendly version.

Director Driscoll requested that, from time to time, the Committee receive a deeper dive into the major quality initiatives of the different clinical departments and other areas. Additionally, she reiterated her request made at a previous meeting to receive copies of the minutes of the hospitals' internal quality committee meetings. Dr. Shannon indicated that he will work to determine the best way to address her request regarding the internal quality committee meeting minutes.

Director Junge requested that the Committee begin receiving regular reports of quality indicators for the correctional area. Dr. Shannon noted that the Committee had sporadically received those reports in the past; at that time, because it involved the subject of litigation, reporting was limited.

Director Suleiman Gonzalez recommended that a schedule and plan for the year be developed for deep dive presentations as referred to earlier in the meeting by Director Driscoll. Additionally, given that the organization is in the process of completing the activities relating to the survey by representatives of TJC, the Committee should continue to monitor the status of matters that emerged from the survey until the Committee sees the progress needed to meet compliance.

IV. Action Items**A. Approve appointments and reappointments of Stroger Hospital Department Chair(s) and Division Chair(s) (Attachment #3)**

Dr. Shannon provided an overview of the proposed initial appointment of the following Stroger Hospital Division Chair:

Name	Department/Appt Term	Title
Victoria Alagiozian-Angelova, MD	Pathology 07/27/2018 – 07/26/2020	Division Chair of Hematopathology

Director Driscoll, seconded by Director Suleiman Gonzalez, moved to approve the proposed initial appointment of the Stroger Hospital Division Chair. THE MOTION CARRIED UNANIMOUSLY.

IV. Action Items (continued)**B. Executive Medical Staff (EMS) Committees of Provident Hospital of Cook County and John H. Stroger, Jr. Hospital of Cook County**

- i. Receive reports from EMS Presidents
- ii. Approve Medical Staff Appointments/Re-appointments/Changes (Attachment #4)

Dr. Trevor Lewis, President of the EMS of John H. Stroger, Jr. Hospital of Cook County, presented his report. He stated that, at this month's EMS meeting, they reviewed presentations by the Division of Infectious Diseases and the Medical Records Committee. He noted that staff continues to make progress with completion of their Comprehensive Medical History and Physical Assessments in a timely manner.

Dr. Valerie Hansbrough, President of the EMS of Provident Hospital of Cook County, presented her report. She stated that staff are continuing to focus on increasing numbers in ambulatory care and the operating room.

Director Suleiman Gonzalez, seconded by Director Driscoll, moved to approve the Medical Staff Appointments/Re-appointments/Changes for John H. Stroger, Jr. Hospital of Cook County. THE MOTION CARRIED UNANIMOUSLY.

Director Driscoll, seconded by Director Suleiman Gonzalez, moved to approve the Medical Staff Appointments/Re-appointments/Changes for Provident Hospital of Cook County. THE MOTION CARRIED UNANIMOUSLY.

Proposed Amendments to the Medical Staff Appointments/Re-appointments/Changes for Provident Hospital of Cook County:

The two (2) physicians listed below were erroneously presented and approved as initial appointments on September 21, 2018, when they should have been presented as reappointment applications; an amendment to reflect those changes is being proposed for the Committee's consideration at its meeting on October 19, 2018.

Initial Physician Appointment Applications Reappointment Applications Physicians:

Department of Pathology:			
Name	Category	Department/Specialty	Appointment Term
Harper, Terence, MD	Consulting	Pathology/Autopsy	September 21, 2018 thru September 20, 2020

Department of Surgery:			
Name	Category	Department/Specialty	Appointment Term
Kacey, Daniel J., MD	Affiliate	General Surgery	September 23, 2018 thru September 22, 2020

IV. Action Items (continued)

C. Minutes of the Quality and Patient Safety Committee Meeting, August 24, 2018

Director Driscoll, seconded by Director Suleiman Gonzalez, moved to accept the Minutes of the Quality and Patient Safety Committee Meeting of August 24, 2018. THE MOTION CARRIED UNANIMOUSLY.

D. Any items listed under Sections IV and V

V. Closed Meeting Items

- A. Medical Staff Appointments/Re-appointments/Changes
- B. Litigation Matter(s)
- C. Matters protected under the federal Patient Safety and Quality Improvement Act of 2005 and the Health Insurance Portability and Accountability Act of 1996
- D. Stroger Hospital Non-Medical Staff Privileging Matters

The Committee did not recess into a closed meeting.

VI. Adjourn

As the agenda was exhausted, Chair Gugenheim declared the meeting ADJOURNED.

Respectfully submitted,
Quality and Patient Safety Committee of the
Board of Directors of the
Cook County Health and Hospitals System

XXXXXXXXXXXXXXXXXXXXXXXXXXXX
Ada Mary Gugenheim, Chair

Attest:

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Deborah Santana, Secretary

Requests/follow-up:

- Follow-up: A recommendation was made for the Board to spend time at the September 28th Board Meeting to review and discuss the Regulatory Update presentation. Page 1
- Follow-up: Follow-up was indicated regarding the question of whether root cause analyses are done when safety events like falls with injury occur. Page 2
- Request: A request was made to receive information on the organization's response when safety events occur (root cause analysis and outcome, corrective action taken). Page 2
- Follow-up: Regarding the draft dashboard of metrics, the measure on Depression Screening Referral Management will be revised to a more reader-friendly version. Page 2
- Request: A request was made to receive deep dive presentations into the major quality initiatives of the different clinical departments and other areas. It was recommended that a schedule and plan for the year be developed for those presentations. Page 2
- Request: A request was made for the Committee to receive minutes of the meetings of the hospitals' internal quality committees. Page 2
- Request: A request was made for the Committee to regularly receive reports of quality indicators for the correctional area. Page 2
- Follow-up: A recommendation was made that the Committee continue to monitor the status of matters that emerged from TJC survey until the Committee sees the progress needed to meet compliance. Page 2